

## Missouri Department of Health and Senior Services

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Richard C. Dunn

TO: Missouri Local Public Health Agencies, Missouri U.S. Influenza Sentinel

Surveillance Physicians, and Stakeholders

FROM: Libby A. Landrum, R.N., M.S.N., Influenza Coordinator

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SUBJECT: Weekly Missouri Influenza Report, 2002-2003 Season

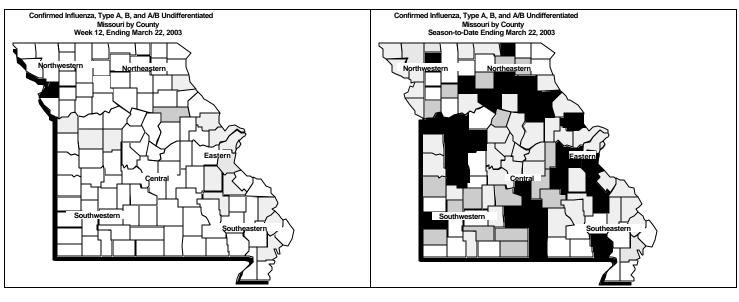
(All data in this report are provisional and may change as reports are updated.)

DATE: April 9, 2003

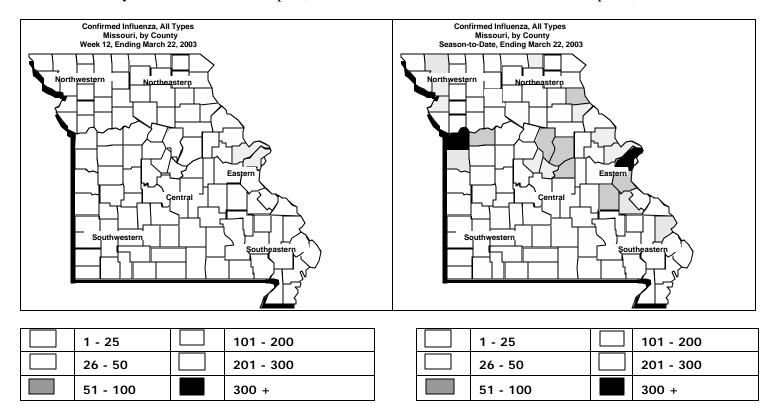
Missouri is reporting "sporadic influenza activity" to the CDC for Week 12.

Reported Laboratory Confirmed Cases by Sub-type								
For the Week Ending March 22, 2003 (Week 12)								
Serogroups  A A A A A B A A Or B Untyped (rapid test)  Total								
Week 12	12	0	6	7	72	98		
Season-to-Date*	394	2	13	1,027	2,074	3,503		

<sup>\*</sup>The influenza season begins with week 40 (week ending October 5, 2002) and ends with week 20 (week ending May 17, 2003).



A and Untyped	A only		A and Untyped	A only
B and Untyped	B only		B and Untyped	B only
Untyped	A, B and Untyped		Untyped	A, B and Untyped



Clusters/Outbre aks of Influenza-like Illness For the Week Ending March 22, 2003 (Week 12)									
Health District	Central	Eastern	NW	SE	SW	Season- to-date	Last Year Season- to-date		
School Closings	0	0	0	0	0	205	6		
Community Outbreaks	0	0	0	0	0	4	3		
Long Term Care or Institutional Outbreaks	0	0	0	0	0	3	10		
Other Outbreaks	0	0	0	0	0	0	0		
Season-to-Date	51	9	81	23	45	212	19		

Pneumonia and Influenza (P&I) Deaths							
For the Week Ending March 15, 2003 (Week 11)							
Week 11	Week 11 Season-to-Date Week 11 Last Season 10 Year Weekly Median						
<b>28 789 61</b> 54 <b>*</b>							

<sup>\*</sup> Prior to 1999, P&I data were collected from week 46 through week 17; therefore, the ten-year median will be noted only during those weeks.

U.S. Influenza Sentinel Physicians Surveillance Network (US ISPSN) Influenza-like Illness (ILI) for the Week Ending March 15, 2003 (Week 11)									
Age 0-4	Age 5-24	Age 25-64	Age 65+	Total ILI Patients Seen	Total Patients Seen	Percent ILI			
20	28	36	3	87	3,509	2.47%*			

\* This percentage is above the national baseline of 1.9%. Data received through the US ISPSN indicates that the percent ILI has been consistently above the national baseline since week 48 (week ending November 30, 2002).

Respiratory Specimens Submitted to SPHL for Viral Testing For the Week Ending March 22, 2003 (We ek 12)										
		Positive Specimens								
	Influenza	Para- influenza	Respiratory Syncytial Virus (RSV)	Adeno- virus	Rhino- virus	Entero- virus	Total Number Specimens Submitted			
Week 12	5	0	0	0	0	0	7			
Season-to-Date	84	4	0	2	0	3	211			

CDC antigenically characterizes a sample of positive Missouri influenza isolates, submitted through the Missouri Department of Health and Senior Services (DHSS), State Public Health Laboratory (SPHL). DHSS has received the results on 14 Missouri isolates. Their antigenic profiles were antigenically similar to that of the reference strain influenza B/Hong Kong/330/2001. Influenza B/Hong Kong/330/2001 was the recommended B component of the 2002-03 influenza vaccine.

Sources of Data: Laboratory confirmed cases are reported to DHSS passive communicable disease surveillance system through the disease registry. Suspected influenza clusters and outbreaks are reported through the active surveillance system. Pneumonia and influenza deaths are reported through the DHSS Bureau of Vital Records. Influenza-like illness data by age category and total number of patient visits by week are reported voluntarily by participants in the U.S. Influenza Sentinel Physicians Surveillance Network.

This report may also be found on the DHSS Internet at: <a href="www.dhss.state.mo.us/Influenza/index.html">www.dhss.state.mo.us/Influenza/index.html</a>. National influenza surveillance information is available from the Centers for Disease Control and Prevention at: <a href="www.cdc.gov/ncidod/diseases/flu/weekly.htm">www.cdc.gov/ncidod/diseases/flu/weekly.htm</a>.

The Missouri Department of Health and Senior Services after hours number for reporting disease cases and emergencies is 1-800-392-0272.